

Relocation Information Sheet
for
No-break Employees & Stokes Students

Privacy Act Statement: Authority for collecting information requested on this form is contained in 5 U.S.C. § 6101, 10 U.S.C. §§ 1601-1614, 50 U.S.C. §§ 402 note, 5 C.F.R. § 610.121, and Executive Order 12333. NSA's Blanket Routine Uses found at 58 Fed. Reg. 10,531 (1993) as well as the specific uses found in GNSA 01 apply to this information. The requested information will be used to prepare travel orders for the new hire relocations. Your disclosure of requested information is voluntary. However, failure to furnish the requested information may delay or prevent the Agency from processing your travel orders for your relocation.

1. Name (first, middle initial, last): _____
2. Recruiter's Name (person that signed your job offer letter): _____
3. Enter on Duty (EOD) Date: _____
4. Type of Hire: No-Break _____ Stokes student _____
5. Day Time Phone Number: _____
6. Email: _____ Fax # _____
7. Current Residence (city, state, county): _____
8. Number of rooms to be moved (from current residence, excluding bathrooms):

9. Additional pick-up of household goods (HHG)? yes _____ no _____. If Yes:
 - 9a. Location: _____ Number of Rooms: _____
10. Privately Owned Vehicle (POV) shipped? yes _____ no _____
11. What is your departure date to travel to the Agency? _____
12. Which mode of transportation you will use to travel to the Agency/school?
Drive: _____ Fly: _____ Train: _____
- 12a. If flying, from which airport? _____
- 12b. If driving, how many miles is it from your current residence to Fort Meade,
MD/school going the most direct route? _____

13. Dependents

Name	Date of Birth	Relationship

If you have dependents:

13a. What date will they be traveling? Date: _____

13b. Which mode of transportation? Drive: _____ Fly: _____ Train: _____

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14. Do you want to use the Defense National Relocation Program (DNRP)?

yes_____ no_____

If yes, complete Relocation Services Request Forms at

<http://www.nab.usacc.army.mil/dnrp>

Return forms to the NSA's DNRP Program Manager via FAX 410-854-7421.

Phone: 240-373-5677

15. Do you want a house hunting trip (HHT)? Yes _____ No _____

If yes:

15a. Who will perform the HHT? New Hire _____ Spouse _____ Both _____

16. HHT can be performed under one of two methods of payment.

Select one: Actual expense (receipts required) _____

Fixed expense (fixed dollar amount provided) _____

17. Proposed mode of travel. POV _____ Air _____ Train _____ Rental Car _____

18. What retirement system are you in? CSRS _____ FERS _____ Other _____

Additional information:
